

## CLAIMS ONLY

Application Number  
10/624131

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5	1					
6	1					
7						
8	1					
9						
10						
11						
12						
13						
14	1					
15	1					
16	1					
17	1					
18	1					
19	1					
20	1					
21	1					
22	1					
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25	1					
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41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	4					
Total Depend	5					
Total Claims	12					

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						